POSITION	INITIALS	ID NO.	DATE
EEE DETERMINATION D.I.P.E. CLASSIFIER FORMALITY REVIEW RESPONSE FORMALITY REVIEV	125		
	INDEX OF	CLAIMS	
— (Through numer	Rejected Allowed	N I A O	Non-elected Interference Appea Objected
Date	. Claim	Date	Claim Date
am Date E	51 52 53 54 55 56 57 58 59 60 61 62 63		101 102 103 104 106 106 107 1 108 109 110 1111 1111 1112

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)